



ELBOW OSTEOCHONDritis DISSECANS (OCD) NON-OPERATIVE REHABILITATION GUIDELINES

General notes:

"As tolerated" should be understood to include with safety for the injury; pain, swelling, or other undesirable factors are indicators that you are doing too much too soon. If any of these should occur, decrease activity level and ice. Ice should be applied to the elbow for 15-20 minutes following each exercise, therapy, or training session.

Return to sport is based on provider team (physician, physician assistant, athletic trainer, therapist) input and appropriate testing.

All times and exercises are to serve as guidelines. Progression through the protocol should be based upon criteria as opposed to dates listed and will vary depending on each individual patient. Progress should be agreed upon by the patient and his/her team of providers.

The following factors should provoke communication with or referral back to the treating physician:

- Visible swelling longer than 2 weeks or new swelling lasting more than 48-72 hours
- Loss of ROM
- Increased pain

Phase 1: (Day 1 – Week 6)

Brace:

- As needed to restrict motion
- Utilize sling for comfort - Take arm out of sling and gently straighten elbow at least 3 times a day. (If not braced or immobilized)

ROM:

- Progress to full and painless

Therapeutic Exercises:

- Finger, hand, and wrist, active range of motion encouraged
- Initiate elbow isometrics
- Core strengthening initiated as tolerated
- Periscapular and shoulder strengthening
- All therapeutic exercises should be completed in a non-weight bearing manner

Manual:

- Joint mobilizations to increase pain free ROM

Proprioception:

- Non weight bearing rhythmic stabilization drills

Cardio:

- Stationary bike and elliptical may be initiated as tolerated

Modalities:

- Cryotherapy
- Electrical stimulation as needed for pain and swelling reduction

Progression to Phase II:

- No pain
- No swelling
- Full ROM



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Phase II: (Weeks 6 – 8)

Brace:

- None

ROM:

- Full and painless

Therapeutic Exercises:

- UBE
- Core strengthening
- Periscapular and shoulder strengthening
- Isotonic elbow, forearm, and wrist strengthening
- All therapeutic exercises should be completed in a non-weight bearing manner

Proprioception:

- Non weight bearing rhythmic stabilization drills

Cardio:

- Stationary bike and elliptical

Modalities:

- Cryotherapy
- Electrical stimulation as needed

Progression to Phase III:

- Involved shoulder and elbow strength 80% of non-involved side
- Satisfactory proprioception

Phase III: (Weeks 8 - 12)

Brace:

- None

ROM:

- Full and painless

Therapeutic Exercises:

- UBE
- Core strengthening
- Periscapular and shoulder strengthening
- Isotonic elbow, forearm, and wrist strengthening
- Initiate weight bearing exercises and plyometrics

Proprioception:

- Rhythmic stabilization drills



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Cardio:

- Stationary bike and elliptical

Modalities:

- Cryotherapy
- Electrical stimulation as needed

Progression to Phase IV:

- Involved shoulder and elbow strength 80-85% of non-involved side
- Satisfactory proprioception
- No pain with weight bearing through involved extremity

Phase IV: (Week 12 on)

Brace:

- None

ROM:

- Full and painless

Therapeutic Exercises:

- UBE
- Core strengthening
- Periscapular and shoulder strengthening
- Isotonic elbow, forearm, and wrist strengthening
- Weight bearing and plyometric exercises
- Initiate return to throwing program week 12

Proprioception:

- Rhythmic stabilization drills

Cardio:

- Stationary bike and elliptical

Modalities:

- Cryotherapy
- Electrical stimulation as needed

Progression to Phase IV:

- Successful completion of interval throwing program



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Return to Sport

Follow up testing determined by your healthcare team:

Overhead athletes

- **ROM**
 - Shoulder and elbow
- **Strength**
 - Manual muscle testing shoulder and elbow
 - Isokinetic testing shoulder and elbow
 - Grip strength
- **Proprioception**
 - Shoulder
- **Functional Tests**
 - Specific to throwing

Upper extremity weight bearing athletes

- **ROM**
 - Elbow
- **Strength**
 - Manual muscle testing
 - Isokinetic testing
 - Grip strength
- **Proprioception**
- **Functional Tests**
 - Specific to weight bearing